

03-11107

<b>FORM B1</b> <b>United States Bankruptcy Court</b> <b>Middle District of North Carolina</b>		<b>Voluntary Petition</b>
Name of Debtor (if individual, enter Last, First, Middle): <b>BALDWIN, BELINDA GRAY</b>		Name of Joint Debtor (Spouse)(Last, First, Middle):
All Other Names used by the Debtor in the last 6 years (include married, maiden, and trade names):		All Other Names used by the Joint Debtor in the last 6 years (include married, maiden, and trade names):
Soc. Sec./Tax I.D. No. (if more than one, state all): <b>245-23-3480</b>		Soc. Sec./Tax I.D. No. (if more than one, state all):
Street Address of Debtor (No. & Street, City, State & Zip Code): <b>406 RAUHUT STREET</b> <b>BURLINGTON, NC 27217</b>		Street Address of Joint Debtor (No. & Street, City, State & Zip Code):
County of Residence or of the Principal Place of Business: <b>ALAMANCE</b>		County of Residence or of the Principal Place of Business:
Mailing Address of Debtor (if different from street address):		Mailing Address of Joint Debtor (if different from street address):
Location of Principal Assets of Business Debtor (if different from address above):		

### Information Regarding the Debtor (Check the Applicable Boxes)

<b>Venue</b> (Check any applicable box)	
<input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.	
<input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.	
<b>Type of Debtor</b> (Check all boxes that apply)	<b>Chapter or Section of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box)
<input checked="" type="checkbox"/> Individual(s) <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Other _____	<input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Sec. 304 - Case ancillary to foreign proceeding
<input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker	<input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input checked="" type="checkbox"/> Chapter 13
<b>Nature of Debts</b> (Check one box)	<b>Filing Fee</b> (Check one box)
<input checked="" type="checkbox"/> Consumer/Non-Business <input type="checkbox"/> Business	<input checked="" type="checkbox"/> Full Filing Fee Attached <input type="checkbox"/> Filing Fee to be paid in installments (Applicable to individuals only) Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form No. 3.
<b>Chapter 11 Small Business</b> (Check all boxes that apply)	
<input type="checkbox"/> Debtor is a small business as defined in 11 U.S.C. § 101 <input type="checkbox"/> Debtor is and elects to be considered a small business under 11 U.S.C. § 1121(e) (Optional)	

<b>Statistical/Administrative Information</b> (Estimates only)		<b>THIS SPACE IS FOR COURT USE ONLY</b>											
<input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.													
Estimated Number of Creditors: <table style="display: inline-table; border: none;"> <tr> <td>1-15</td> <td>16-49</td> <td>50-99</td> <td>100-199</td> <td>200-999</td> <td>1000-over</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>			1-15	16-49	50-99	100-199	200-999	1000-over	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1-15	16-49	50-99	100-199	200-999	1000-over								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
Estimated Assets: <table style="display: inline-table; border: none;"> <tr> <td>\$0 to \$50,000</td> <td>\$50,001 to \$100,000</td> <td>\$100,001 to \$500,000</td> <td>\$500,001 to \$1 million</td> <td>\$1,000,001 to \$10 million</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>		\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>UNITED STATES BANKRUPTCY COURT</b> <b>MIDDLE DISTRICT OF NORTH CAROLINA</b> <b>RECEIPT</b> <b>Case # 03-11107</b> Filed: 08:00 AM, 03/31/03 Chapter 13 Greensboro	
\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million									
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
Estimated Debts: <table style="display: inline-table; border: none;"> <tr> <td>\$0 to \$50,000</td> <td>\$50,001 to \$100,000</td> <td>\$100,001 to \$500,000</td> <td>\$500,001 to \$1 million</td> <td>\$1,000,001 to \$10 million</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>		\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million									
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
Judge: William L. Stocks Trustee: Anita Jo Troxler Debtor(s): Belinda Gray Baldwin													

Code	Qty	Amount
13	1	\$185.00

ORIGINAL

#### First Meeting of Creditors

01:30 PM, April 28, 2003  
 Creditor's Mtg. Rm. 1st Flr.  
 U.S. Bankruptcy Court  
 101 S. Edgeworth St.  
 Greensboro, NC 27401

**TOTAL PAID: \$185.00**

From: Steven H. Messick  
 3009 S. Church St.  
 P. O. Box 2439  
 Burlington, NC 27216-2439

<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case)</i>		Name of Debtors: <b>BELINDA GRAY BALDWIN</b>		Page 2
<b>Prior Bankruptcy Case Filed Within Last 6 Years (If more than one, attach additional sheet)</b>				
Location Where Filed: <b>NONE</b>		Case Number:		Date Filed:
<b>Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet)</b>				
Name of Debtor: <b>NONE</b>		Case Number:		Date Filed:
District:		Relationship:		Judge:
<b>Signatures</b>				
<b>Signature(s) of Debtor(s) (Individual/Joint)</b> I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. X <u>Belinda Gray Baldwin</u> Signature of Debtor X <b>Not Applicable</b> Signature of Joint Debtor Telephone Number (If not represented by attorney) <u>3/27/03</u> Date		<b>Signature(s) of Debtor (Corporation/Partnership)</b> I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor. The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition. X <b>Not Applicable</b> Signature of Authorized Individual Print or Type Name of Authorized Individual Title of Authorized Individual Date		
X <u>STEVEN H. MESSICK, 8901</u> Signature of Attorney for Debtor(s) Printed Name of Attorney for Debtor(s) / Bar No. <b>MESSICK, MESSICK &amp; MESSICK</b> Firm Name <b>WESTPARK CENTER 3009 S. CHURCH ST., PO BOX 2439</b> Address <b>BURLINGTON, NC 27216-2439</b> Telephone Number <b>(336)584-3575</b> <u>3/27/03</u> Date		<b>Signature of Non-Attorney Petition Preparer</b> I certify that I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, that I prepared this document for compensation, and that I have provided the debtor with a copy of this document. <b>Not Applicable</b> Printed Name of Bankruptcy Petition Preparer Social Security Number Address Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document:		
<b>Exhibit A</b> (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11) <input type="checkbox"/> Exhibit A is attached and made a part of this petition.		If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person. X <b>Not Applicable</b> Signature of Bankruptcy Petition Preparer Date		
<b>Exhibit B</b> (To be completed if debtor is an individual whose debts are primarily consumer debts) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he/she] may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, and have explained the relief available under each such chapter. X <u>3/27/03</u> Signature of Attorney for Debtor(s) Date		A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.		

## THE PLAN

The Debtor's take-home pay is \$ **1,513.40** per Month

The Joint Debtor's take-home pay is \$ **0.00** per Month

### Debtor

### Joint Debtor

Employer Name and Address: **UNC HEALTHCARE  
101 MANNING AVENUE  
CHAPEL HILL, NC 27514**

Length of Employment **4 YEARS**

Phone No. (Business)

The Debtor's plan is to pay from future income and earnings, as much as reasonably possible, as determined by the Court, for a period not less than 36 months and not in excess of 60 months. The Debtor considers the reasonable amount to be **935.00** dollars **Monthly** and the reasonable plan length to be **54** months. However, the sum is subject to determination of the Court from time to time. All funds will be disbursed to creditors, as may be approved by the court, after first deductions costs of administration. Debtor has a principal place of employment, residence or domicile or owns property within this District.

Annexed hereto are schedules which set forth accurate description and valuations of all the items of property, real and personal and a complete statement of all debts with the full names and addresses of all creditors.

## REQUEST FOR RELIEF

The Debtor is an individual with regular income who owes, as of this date of the filing of this petition, non-contingent, liquidated, unsecured debts of less than \$100,000.00 and non-contingent liquidated secured debts of less than \$350,000.00 and hereby requests relief in accordance with Chapter 13 of Title 11, United States Codes.

Date:

TO: , STANDING TRUSTEE  
FROM: STEVEN H. MESSICK , ATTORNEY FOR DEBTOR  
PROPOSED PAYMENT: \$3,279.08 Monthly

DEBTORS:

DEBTOR BELINDA GRAY BALDWIN S.S.# 245-23-3480

JOINT DEBTOR S.S.#

ADDRESS: 406 RAUHUT STREET  
BURLINGTON, NC 27217

DEBTOR'S EMPLOYER: UNC HEALTHCARE  
101 MANNING AVENUE  
CHAPEL HILL, NC 27514

TAKE HOME PAY:  
\$ 1,513.40 PER MONTH

JOINT DEBTOR'S EMPLOYER:

TAKE HOME PAY:  
\$ 0.00 PER MONTH

OTHER SOURCES OF INCOME:

- ☐ DEBTOR WISHES TO PAY DIRECT.
- ☐ DEBTOR(S) WISHES TO BEGIN PAYROLL DEDUCTION FROM THE CHECK RECEIVED Monthly  
(MONTHLY, 2 WEEKS, WEEKLY, SEMI-MONTHLY) ON \_\_\_\_\_ DEBTOR'S NAME

\_\_\_\_\_  
ATTORNEY FOR DEBTOR  
STEVEN H. MESSICK

In re: **BELINDA GRAY BALDWIN**  
**245-23-3480**

Case No.

## SCHEDULE A - REAL PROPERTY

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT MARKET VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
HOUSE AND LOT LOCATED AT 406 RAUHUT ST., BURLINGTON, NC 27217  FORECLOSURE PROCEDURE COMMENCED IN ALAMANCE COUNTY, CASE NUMBER: 03-SP-143, FILED MARCH 18, 2003.	1ST DT		\$ 81,332.00	\$ 87,000.00
Total >			\$ 81,332.00	

(Report also on Summary of Schedules.)

## SCHEDULE B - PERSONAL PROPERTY

TYPE OF PROPERTY	NONE	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT MARKET VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand	<b>X</b>			
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		<b>SECU CHECKING AND SAVINGS ACCOUNT</b>		<b>0.00</b>
3. Security deposits with public utilities, telephone companies, landlords, and others.	<b>X</b>			
4. Household goods and furnishings, including audio, video, and computer equipment.		<b>KITCHEN APPLIANCES: 50.00 WASHER: 150.00 DRYER: 150.00 DEN FURNITURE: 500.00 KITCHEN FURNITURE: 75.00 BEDROOM FURNITURE: 250.00 TV: 50.00 COMPUTER: 100.00 PRINTER: 50.00</b>		<b>1,375.00</b>
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	<b>X</b>			
6. Wearing apparel.		<b>CLOTHING AND PERSONAL EFFECTS</b>		<b>100.00</b>
7. Furs and jewelry.		<b>MISC. JEWELRY</b>		<b>100.00</b>
8. Firearms and sports, photographic, and other hobby equipment.	<b>X</b>			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.		<b>LIFE INSURANCE THROUGH EMPLOYER</b>		<b>0.00</b>
10. Annuities. Itemize and name each issuer.	<b>X</b>			
11. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Itemize.		<b>STATE RETIREMENT THROUGH EMPLOYER</b>		<b>UNKNOWN</b>
12. Stock and interests in incorporated and unincorporated businesses. Itemize.	<b>X</b>			

## SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

TYPE OF PROPERTY	NONE	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT MARKET VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
13. Interests in partnerships or joint ventures. Itemize.	X			
14. Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
15. Accounts receivable.	X			
16. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
17. Other liquidated debts owing debtor including tax refunds. Give particulars.	X			
18. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule of Real Property.	X			
19. Contingent and non-contingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
20. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
21. Patents, copyrights, and other intellectual property. Give particulars.	X			
22. Licenses, franchises, and other general intangibles. Give particulars.	X			
23. Automobiles, trucks, trailers, and other vehicles.		<b>1978 OLDS CUTLASS LX 154857 MILES (BAD CONDITION)</b>		<b>500.00</b>
		<b>1997 FORD ESCORT SEDAN LX (86932 MILES)</b>		<b>3,308.00</b>
24. Boats, motors, and accessories.	X			
25. Aircraft and accessories.	X			
26. Office equipment, furnishings, and supplies.	X			

In re **BELINDA GRAY BALDWIN**  
**245-23-3480**

Case No.

## SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

TYPE OF PROPERTY	NONE	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT MARKET VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
27. Machinery, fixtures, equipment and supplies used in business.	<b>X</b>			
28. Inventory.	<b>X</b>			
29. Animals.	<b>X</b>			
30. Crops - growing or harvested. Give particulars.	<b>X</b>			
31. Farming equipment and implements.	<b>X</b>			
32. Farm supplies, chemicals, and feed.	<b>X</b>			
33. Other personal property of any kind not already listed. Itemize.	<b>X</b>			
_____ continuation sheets attached			Total	<b>\$ 5,383.00</b>

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)



245-23-3480

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	DEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND MARKET VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. <b>407188937</b> <b>AMERICREDIT</b> <b>PO BOX 78143</b> <b>PHOENIX, AZ 85062</b>		<b>3-2000</b> <b>1ST LIEN ON TITLE</b> <b>1997 FORD ESCORT SEDAN LX</b> <b>(86932 MILES)</b>  <b>VALUE \$3,308.00</b>				<b>3,815.00</b>	<b>\$507.00</b>
ACCOUNT NO. <b>FINANCE AMERICA CORP</b> <b>PO BOX 9700</b> <b>BOULDER, CO 80301</b>		<b>Security Agreement</b> <b>KIRBY VACUUM CLEANER</b>  <b>VALUE \$300.00</b>				<b>2,199.60</b>	<b>\$0.00</b>
ACCOUNT NO. <b>0101364719</b> <b>OCWEN FEDERAL BANK FSB</b> <b>PO BOX 57002</b> <b>IRVINE, CA 92619</b>  <b>OCWEN FINANCIAL</b> <b>12650 INGENUITY DR.</b> <b>PO BOX 514577</b> <b>LOS ANGELES, CA 90051</b>  <b>MOSS, CODILIS, STAWIARSKI, ET ALS</b> <b>ATTORNEY AT LAW</b> <b>6560 GREENWOOD PLAZA BLVD., STE 550</b> <b>ENGLEWOOD, CO 80111-7100</b>		<b>10-1-02</b> <b>1ST DT</b> <b>HOUSE AND LOT LOCATED AT</b> <b>406 RAUHUT ST., BURLINGTON,</b> <b>NC 27217</b>  <b>FORECLOSURE PROCEDURE</b> <b>COMMENCED IN ALAMANCE</b> <b>COUNTY, CASE NUMBER:</b> <b>03-SP-143, FILED MARCH 18,</b> <b>2003.</b>  <b>VALUE \$81,332.00</b>				<b>87,000.00</b>	<b>\$5,668.00</b>

In re: **BELINDA GRAY BALDWIN**

Case No.

245-23-3480

## SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND MARKET VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO.						87,000.00	\$5,668.00
<b>PIEDMONT BUILDING INSPECTIONS</b> 2261 CAROLINA ROAD BURLINGTON, NC 27217		<b>Security Agreement</b> HOUSE AND LOT LOCATED AT 406 RAUHUT ST., BURLINGTON, NC 27217  FORECLOSURE PROCEDURE COMMENCED IN ALAMANCE COUNTY, CASE NUMBER: 03-SP-143, FILED MARCH 18, 2003.  <b>VALUE \$81,332.00</b>					

Subtotal  
(Total of this page)

>

**\$87,000.00**

Total

>

**\$180,014.60**

(Report total also on Summary of Schedules)

## **SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

☒ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

### **TYPES OF PRIORITY CLAIMS**

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(2).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$4300\* per person earned within 90 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(3).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$4300\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(5).

☐ **Deposits by individuals**

Claims of individuals up to \$1,950\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(6).

☐ **Alimony, Maintenance, or Support**

Claims of a spouse, former spouse, or child of the debtor for alimony, maintenance, or support, to the extent provided in 11 U.S.C. § 507(a)(7).

☐ **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ **Other Priority Debts**

\* Amounts are subject to adjustment on April 1, 1998, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Subtotal (Total of this page)	>	<b>\$0.00</b>
Total	>	<b>\$0.00</b>

(Report total also on Summary of Schedules)

In re: **BELINDA GRAY BALDWIN**  
**245-23-3480**

Case No.

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

☐ Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED, AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>5488-9750-1791-4253</b>  <b>HOUSEHOLD BANK</b> <b>PO BOX 5222</b> <b>CAROL STREAM, ILL 60197</b>		<b>11-02</b>  <b>CREDIT CARD DEBT</b>				<b>343.45</b>
ACCOUNT NO. <b>4254490300437686</b>  <b>PROVIDIAN NATIONAL BANK</b> <b>PO BOX 660737</b> <b>DALLAS, TX 75266</b>  <b>FINANCIAL RECOVERY SERVICES</b> <b>PO BOX 385908</b> <b>MINNEAPOLIS, MN 55438</b>		<b>CREDIT CARD DEBT</b>				<b>834.97</b>
ACCOUNT NO. <b>466241</b>  <b>WHA DBA CHAPEL OB/GYN</b> <b>PO BOX 3317</b> <b>CHAPEL HILL, NC 27514</b>		<b>MEDICAL BILL</b>				<b>437.90</b>

Subtotal  
(Total of this page) >

Total >

**\$1,616.32**

**\$1,616.32**

(Report total also on Summary of Schedules)

In re: **BELINDA GRAY BALDWIN**  
**245-23-3480**

Case No. .

## **SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES**

☒ Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST, STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT

In re: **BELINDA GRAY BALDWIN**  
**245-23-3480**

Case No.

## **SCHEDULE H - CODEBTORS**

☒ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
------------------------------	------------------------------

In re **BELINDA GRAY BALDWIN**  
**245-23-3480**

Case No. \_\_\_\_\_

## SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

Debtor's Marital Status: <b>SINGLE</b>	DEPENDENT'S OF DEBTOR AND SPOUSE		
Debtor's Age: Spouse's Age:	NAMES <b>EBONY NICOLE JONES</b>	AGE <b>10</b>	RELATIONSHIP <b>CHILD</b>
EMPLOYMENT:	DEBTOR	SPOUSE	
Occupation	<b>MEDICAL SUPPORT ASST</b>		
How long employed	<b>4 YEARS</b>		
Name and Address of Employer	<b>UNC HEALTHCARE 101 MANNING AVENUE CHAPEL HILL, NC 27514</b>		

	DEBTOR	SPOUSE
Income: (Estimate of average monthly income)		
Current monthly gross wages, salary, and commissions (pro rate if not paid monthly.)	\$ <u>2,099.68</u>	\$ _____
Estimated monthly overtime	\$ <u>0.00</u>	\$ _____
<b>SUBTOTAL</b>	<b>\$ <u>2,099.68</u></b>	<b>\$ _____</b>
<b>LESS PAYROLL DEDUCTIONS</b>		
a. Payroll taxes and social security	\$ <u>586.29</u>	\$ _____
b. Insurance	\$ <u>0.00</u>	\$ _____
c. Union dues	\$ <u>0.00</u>	\$ _____
d. Other (Specify) _____	\$ <u>0.00</u>	\$ _____
<b>SUBTOTAL OF PAYROLL DEDUCTIONS</b>	<b>\$ <u>586.29</u></b>	<b>\$ _____</b>
<b>TOTAL NET MONTHLY TAKE HOME PAY</b>	<b>\$ <u>1,513.40</u></b>	<b>\$ _____</b>
Regular income from operation of business or profession or farm (attach detailed statement)	\$ <u>0.00</u>	\$ _____
Income from real property	\$ <u>0.00</u>	\$ _____
Interest and dividends	\$ <u>0.00</u>	\$ _____
Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above.	\$ <u>0.00</u>	\$ _____
Social security or other government assistance (Specify) _____	\$ <u>0.00</u>	\$ _____
Pension or retirement income	\$ <u>0.00</u>	\$ _____
Other monthly income (Specify) _____	\$ <u>0.00</u>	\$ _____
<b>TOTAL MONTHLY INCOME</b>	<b>\$ <u>1,513.40</u></b>	<b>\$ _____</b>
<b>TOTAL COMBINED MONTHLY INCOME \$</b> <u>1,513.40</u> <b>(Report also on Summary of Schedules)</b>		

Describe any increase or decrease of more than 10% in any of the above categories anticipated to occur within the year following the filing of this document:  
**NONE**

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse".

Rent or home mortgage payment (include lot rented for mobile home)		\$	0.00
Are real estate taxes included?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
Is property insurance included?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
Utilities Electricity and heating fuel		\$	65.00
Water and sewer		\$	20.00
Telephone		\$	50.00
Other <b>CABLE</b>		\$	25.00
Home Maintenance (Repairs and upkeep)		\$	0.00
Food		\$	200.00
Clothing		\$	25.00
Laundry and dry cleaning		\$	20.00
Medical and dental expenses		\$	15.00
Transportation (not including car payments)		\$	60.00
Recreation, clubs and entertainment, newspapers, magazines, etc.		\$	10.00
Charitable contributions		\$	0.00
Insurance (not deducted from wages or included in home mortgage payments)			
Homeowner's or renter's		\$	21.00
Life		\$	36.00
Health		\$	0.00
Auto		\$	64.00
Other		\$	0.00
Taxes (not deducted from wages or included in home mortgage payments)			
(Specify)		\$	0.00
Installment payments (In chapter 12 and 13 cases, do not list payments to be included in the plan)			
Auto		\$	0.00
Other		\$	0.00
Alimony, maintenance or support paid to others		\$	0.00
Payments for support of additional dependents not living at your home		\$	0.00
Regular expenses from operation of business, profession, or farm (attach detailed statement)		\$	0.00
Other		\$	0.00

**TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)**

**\$ 611.00**

(FOR CHAPTER 12 AND 13 DEBTORS ONLY)

Provide the information requested below, including whether plan payments are to be made bi-weekly, monthly, annually, or at some other regular interval.

A. Total projected monthly income		\$	<u>1,513.40</u>
B. Total projected monthly expenses		\$	<u>611.00</u>
C. Excess income (A minus B)		\$	<u>902.40</u>
D. Total amount to be paid into plan each	<b>Monthly</b>	\$	<u>935.00</u>
	(interval)		